

OIPE IAP68  
 SEP 06 2005  
 PATENT & TRADEMARK OFFICE

IPW

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2005</h2>		Application Number	10/808,543
		Filing Date	3/25/2004
		First Named Inventor	Watanabe
		Examiner Name	Karl D. EASTHOM
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit	2832
TOTAL AMOUNT OF PAYMENT (\$)		120	Attorney Docket No. 01-625

**METHOD OF PAYMENT** (check all that apply)

☒ Check    ☐ None    ☐ Other (please identify):

☒ Deposit Account    Deposit Account Number: 50-1147    Deposit Account Name: Posz Law Group, PLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**    **Multiple Dependent Claims**    **Fee (\$)**    **Fee Paid (\$)**

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ \_\_\_\_\_ (\$ for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**    **Extra Sheets**    **Number of each additional 50 or fraction thereof**    **Fee (\$)**    **Fee Paid (\$)**

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

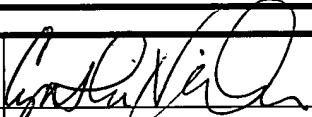
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: (Petition for Extension of Time (1 month)) \_\_\_\_\_

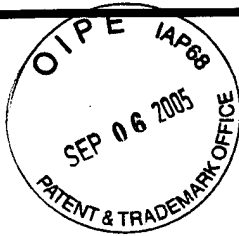
**Fees Paid (\$)** 120

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,880	Telephone (703) 707-9110
Name (Print/Type)	Cynthia K. Nicholson	Date 6 September 2005	

# PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
01-625



In re Application of **Watanabe et al.**

Application Number **10/808,543**

Filed: **3/25/2004**

For: **PRESSURE-SENSITIVE RESISTOR AND PRESSURE-SENSITIVE SENSOR USING THE SAME**

Group Art Unit  
2832

Examiner **Karl D. EASTHOM**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |                                     |   |                    |
|-------------------------------------|---|--------------------|
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1))   | \$ <u>120.00</u>   |
| <input type="checkbox"/>            | Two months (37 CFR 1.17(a)(2))  | \$ <u>450.00</u>   |
| <input type="checkbox"/>            | Three months (37 CFR 1.17(a)(3))  | \$ <u>1020.00</u>  |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))   | \$ <u>1,590.00</u> |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))   | \$ <u>2160.00</u>  |
| <input type="checkbox"/>            | Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____. |                    |

A small entity statement under 37 CFR 1.27:

- ☐ is enclosed.
- ☐ has already been filed in this application.
- ☒ A check in the amount of the fee is enclosed.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1147. I have enclosed a duplicate copy of this sheet.

I am the ☐ assignee of record of the entire interest.

- ☐ applicant.
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_

Date 6 September 2005

  
Signature

Cynthia K. Nicholson(Reg. No.36,880)

Typed or printed name

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